

vanity of a "talker" who maliciously and libelously criticizes a "worker" in a letter to a pal—male or female—to have that pal turn it over to the worker concerned. Such a letter in a worker's hands is an effective and permanent bloc. It is, of course, more if he cares to make it so.

However, sometimes "talkers" foregather in public places and, without bothering to see who is close enough to hear, proceed to outline their destructive plans.

Old experienced "talkers," when they are operating on "high," usually seek a secluded spot, where the light is not too bright, and whisper.

As we were saying, the editorial is fine, and it will do us all good, whether "talkers" or "workers," to read and ponder it.

REPRODUCING EDITORIALS

It is not to be expected that more than a few of the physicians in any center are going to take the trouble to examine more than a very few medical journals. Only those located conveniently to medical libraries have the opportunity to do wide medical journal reading, even if they wished.

The editor of CALIFORNIA AND WESTERN MEDICINE always has felt that a great deal of worthwhile discussion of subjects important to physicians, particularly that found in editorials, should have wider distribution. Following out this policy, many editorials, editorial comment, reports of committees, abstracts, proceedings of various special organizations, and similar matter, has been, and is being republished in CALIFORNIA AND WESTERN MEDICINE, always, of course, giving due credit.

That several other editors, both of medical and more general publications, and even newspapers, have the same idea is attested by the wide reproduction and abstracts from CALIFORNIA AND WESTERN MEDICINE editorials now brought to us by press-clipping services.

If you have what you believe to be good editorial matter or information from which editorials should be prepared, please send it in. Both the ideas and the material for many of the editorials now running in CALIFORNIA AND WESTERN MEDICINE, and some of the several now in the hands of the executive committee for consideration and censorship if need be before publication, have been supplied by an ever-widening circle of members who are sincerely interested in making C. and W. M. serve its purpose more thoroughly and wisely.

INDUSTRIAL INSURANCE CARRIERS ESTABLISHING THEIR OWN MEDICAL SOCIETIES

(Read, approved and ordered published by the Executive Committee of the C. M. A.)

There is much that should be interesting, illuminating, and of prognostic value to physicians in the rapidly growing custom of industrial accident carriers in promoting and operating their own clinics. The custom has become more general in Philadelphia than elsewhere, but it is spreading over wide areas. In these "service stations" doctors, nurses,

and others work on a small salary, a small commission, or both.

Development in the whole field of industrial medicine is headed in many wrong directions in California. A few members now seem to think that the moral code of ethics should have waivers put into it to allow them to meet the "peculiarities" of this branch of medicine. A cursory examination of the constitution and by-laws of the California Medical Association and the American Medical Association should be convincing that there is not a chance that such modifications will be made. There is nothing irksome in the moral code to which physicians must subscribe and hold inviolate, so long as they are ethical members of a great humanitarian profession.

It is true that there are physicians practicing industrial medicine, and other branches for that matter, who had their fingers crossed when they subscribed to the principles of ethics, and a few of them have long since repudiated these principles and are operating openly as free lances. To all such, we commend the code of chiropractors and other cultists.

C. M. A. DIRECTORY

Members of the C. M. A. are reminded that authority was given the last annual meeting for the officers and executive committee of the society to prepare and issue a directory of the members of the state organization. This listing is to be arranged alphabetically by counties.

County societies that wish reprints of their section only for distribution in local communities may secure there reprints by taking the matter up with the secretary of the C. M. A. This directory is now in course of preparation.

Caution—This directory must not be confused, as is apparently being done in the minds of some members, with other so-called directories of physicians and surgeons of the cities and counties of the state of California. Private directories are not under control of the organized medical profession, and none of them has been endorsed by the California Medical Association, regardless of whatever statements may be made by salesmen of these commercial directories.

Simplicity—"What a blessing is simplicity. And what a tenfold blessing it would be if simplicity were a part of medical thought and education," says an editorial in Colorado Medicine. "We could better understand ourselves if we forgot our jargon and abracadabras and learned directness in thought and simplicity in expression. Surely there is spurious learning when we speak of 'dorsal decubitus.' The medical dictionary defines 'dorsal decubitus' as 'recumbency in the supine position,' and the ordinary reader then needs another dictionary to learn that 'recumbency in the supine position' is 'lying on the back.' This by way of illustration.

"Medical thought and writings are clogged by an accepted style of expression in which words dress themselves up and assume dignities, and bow stiffly and severely, and refuse recognition. The result is that when Doc really wants to say something, he doesn't know the language. He may attempt to explain to his friends or to a popular audience, but he finds himself too ignorant to do it."